

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Progressive Americans for Democracy

ADDRESS (number and street) ▼

PO Box 26246

☐ Check if different than previously reported. (ACC)

Eugene

OR

97402

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00417493

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☒ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
04 01 2014

through

M M M / D D D / Y Y Y Y Y Y
06 30 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Don E Corson

Signature of Treasurer

Don E Corson

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 08 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Progressive Americans for Democracy

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y 06 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y 2014		5853.07
(b) Cash on Hand at Beginning of Reporting Period.....	5031.45	
(c) Total Receipts (from Line 19)	14509.22	18510.53
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	19540.67	24363.60
7. Total Disbursements (from Line 31)	12285.31	17108.24
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7255.36	7255.36
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Progressive Americans for Democracy

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
04 / 01 / 2014

To:

M M / D D / Y Y Y Y Y
06 / 30 / 2014
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

0.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

0.00

0.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

14500.00

18500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

14500.00

18500.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

6.46

6.46

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

2.76

4.07

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

14509.22

18510.53

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

14509.22

18510.53

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	785.31	3494.24
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	785.31	3494.24
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7500.00	8614.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	4000.00	5000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	12285.31	17108.24
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12285.31	17108.24

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	14500.00	18500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14500.00	18500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	785.31	3494.24
37. Offsets to Operating Expenditures (from Line 15, page 3).....	6.46	6.46
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	778.85	3487.78

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A=N5HCB
.

Form/Schedule: F3XA
Transaction ID :

Amendment due to change in databases, which resulted in an incorrect reporting of funds preceding this reporting period. This report reflects accurate totals.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 13

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Progressive Americans for Democracy

Full Name (Last, First, Middle Initial)

A. Air Line Pilots Association PAC

Mailing Address 1625 Massachusetts Avenue NW

City	State	Zip Code
Washington	DC	20036-2212

FEC ID number of contributing federal political committee.

C C00035451

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

05 / 28 / 2014

Transaction ID : C3863614

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Burlington Northern Santa Fe Corporation Railpac (bnsf Railpac)

Mailing Address PO Box 961039

City	State	Zip Code
Fort Worth	TX	76161-0039

FEC ID number of contributing federal political committee.

C C00235739

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

06 / 06 / 2014

Transaction ID : C3890780

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. International Brotherhood Of Electrical Workers Committee On Political Education

Mailing Address 900 7th Street NW

City	State	Zip Code
Washington	DC	20001-3886

FEC ID number of contributing federal political committee.

C C00027342

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

05 / 09 / 2014

Transaction ID : C3863672

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

12500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 13

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Progressive Americans for Democracy

Full Name (Last, First, Middle Initial)

A. Norfolk Southern Corporation Good Government Fund

Mailing Address 3 Commercial Pl

City State Zip Code
 Norfolk VA 23510-2108

FEC ID number of contributing
federal political committee.

C C00009282

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

05 / 12 / 2014

Transaction ID : C3863674

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

2000.00

TOTAL This Period (last page this line number only)..... ►

14500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Progressive Americans for Democracy

Full Name (Last, First, Middle Initial)

A. Cardinal Services, Inc. | Workplace Solutions

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2014

Mailing Address 405 Lincoln Street

City	State	Zip Code
Eugene	OR	97401-2516

Purpose of Disbursement
bookkeeping services expense

001

Candidate Name

Category/
Type**Transaction ID : D215931**

Amount of Each Disbursement this Period

37.25

Office Sought:	House	Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Senate		
	President		
State:	District:		

Full Name (Last, First, Middle Initial)

B. Cardinal Services, Inc. | Workplace Solutions

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2014

Mailing Address 405 Lincoln Street

City	State	Zip Code
Eugene	OR	97401-2516

Purpose of Disbursement
bookkeeping services expense

001

Candidate Name

Category/
Type**Transaction ID : D215936**

Amount of Each Disbursement this Period

37.25

Office Sought:	House	Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Senate		
	President		
State:	District:		

Full Name (Last, First, Middle Initial)

C. Cardinal Services, Inc. | Workplace Solutions

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2014

Mailing Address 405 Lincoln Street

City	State	Zip Code
Eugene	OR	97401-2516

Purpose of Disbursement
bookkeeping services expense

001

Candidate Name

Category/
Type**Transaction ID : D227562**

Amount of Each Disbursement this Period

37.25

Office Sought:	House	Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Senate		
	President		
State:	District:		

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

111.75

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 13

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Progressive Americans for Democracy

Full Name (Last, First, Middle Initial)

A. Adrienne M Colaizzi

Mailing Address 2433 Portland Street

City Eugene State OR Zip Code 97405-3124

Purpose of Disbursement
payroll: June '14

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2014
Transaction ID : D227563

Amount of Each Disbursement this Period

48.15

Full Name (Last, First, Middle Initial)

B. Adrienne M Colaizzi

Mailing Address 2433 Portland Street

City Eugene State OR Zip Code 97405-3124

Purpose of Disbursement
payroll: April '14

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 15 / 2014
Transaction ID : D215932

Amount of Each Disbursement this Period

48.14

Full Name (Last, First, Middle Initial)

C. Adrienne M Colaizzi

Mailing Address 2433 Portland Street

City Eugene State OR Zip Code 97405-3124

Purpose of Disbursement
payroll: May '14

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2014
Transaction ID : D215935

Amount of Each Disbursement this Period

48.15

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.44

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Progressive Americans for Democracy

Full Name (Last, First, Middle Initial)

A. Complete CampaignsMailing Address 610 Gateway Center Way
Suite K

City San Diego State CA Zip Code 92102-4548

Purpose of Disbursement
computer expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		01		2014

Transaction ID : D215933

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

B. NGP VAN, Inc.Mailing Address 1101 15th St NW
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement
computer expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2014

Transaction ID : D227460

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

500.00

756.19

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Progressive Americans for Democracy

Full Name (Last, First, Middle Initial)

A. Democratic Congressional Campaign Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2014

Mailing Address 430 S Capitol Street SE

City	State	Zip Code
Washington	DC	20003-4024

Purpose of Disbursement
political contribution

011

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Transaction ID : D228015

Amount of Each Disbursement this Period

7500.00

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

7500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Progressive Americans for Democracy

Full Name (Last, First, Middle Initial)

A. Democratic Party Of Oregon

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2014

Mailing Address 232 NE 9th Avenue
Suite 105

City Portland State OR Zip Code 97232-2915

Purpose of Disbursement
political contribution

Candidate Name

011

Category/
Type**Transaction ID : D228016**

Amount of Each Disbursement this Period

4000.00

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4000.00

4000.00
